ANNUAL REPORT

2023



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Executive summary

This report represents the WHO-supported NTDs program activities and key performances in 2023. It is categorized into three sections: The first section states on the disease targeted for eradication (Guinea worm disease); the second section is on the Preventive Chemotherapy (PC)-NTDs (Trachoma, Schistosomiasis, Soil Transmitted Helminthiasis, Onchocerciasis and Lymphatic Filariasis) and the third section is focused on the case management NTDs (Leishmaniasis, Leprosy, Human African Trypanosomiasis, Noma and other skin NTDs).

WHO sustained active Guinea worm disease surveillance in seven refugee camps of Gambella and Benishangul Gumuz regions hosting more than 450,00 refugee populations. In 2023, the country didn't report any human cases except for one dog infection which is contained. This gives hope for the country to interrupt the transmission of the disease very soon.

WHO supported Ministry of Health in scaling up and scaling down interventions notably on Mass Drug Administration (MDA) campaigns, mapping/surveys for PC NTDs, and facilitated the PC NTD drug donation through the Joint Application Package (JAP).

After 30 years of zero reports, the country faced the re-emergence of Human African Trypanosomiasis (HAT) and reported the first case in August 2022. Subsequently, a total of 8 cases were reported until June 2023. The three levels of WHO supported the outbreak response successfully. Since June 2023, there has been no case of HAT reported so far. The country office also managed to advocate for the initiation of Noma control program in Ethiopia, mobilized funding from WHO African regional office and provided training for 111 primary healthcare workers in four regions. The visceral leishmaniasis case fatality rate in 2023 had reduced to 2.7% from 4.6% in 2022. There were outbreaks of visceral and cutaneous Leishmaniasis in Southern Nations and Somali regions, respectively. These outbreaks were successfully responded.

Overall, apart from the technical assistance, financial support of 358,060 USD was provided to the MOH, regions, and Universities either by Direct Financial Cooperation (DFC) or Direct Implementation (DI) for various NTDs implementations.

SECTION III Guinea Worm Eradication Program

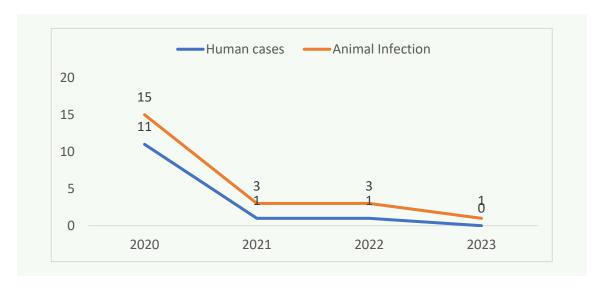
SECTION 1

GUINEA WORM ERADICATION PROGRAMME

Background

During 2023 Ethiopia's Dracunculiasis Eradication Programme (EDEP) reported zero human case and one animal infection from Gambella region. This represents significant progress as compared to one human case and three animal infections in 2022 (figure 1 shows human and animal infections in the past 4 years). In 2023, the WHO country office provided technical and financial support for maintaining optimal level of dracunculiasis surveillance in seven refugee camps in Gambella and Benishangul Gumuz regions hosting over **450,000** refugees from dracunculiasis -endemic country South Sudan. The refugee camps supported by WHO include Kule, Jewi, Okugo, Nguenyyiel, Terkedi, Tsore, and Sherkole. Likewise, The Carter Center (TCC) provided technical and financial support for dracunculiasis eradication program in endemic and high-risk districts of the country. This report summarizes major activities and achievement of WHO supported Guinea worm eradication program in 2023.

Figure 1 Human cases and animal infections reported from 2020 to 2023 in Ethiopia



National level program coordination

- WHO supported the development of EDEP annual action plan for 2023. The
 operational plan was developed by convening a meeting with all stakeholders and
 partners supporting the eradication effort. This enabled partners and stakeholders
 to align their plan accordingly. The operational plan was developed based on the
 draft EDEP strategic plan and national NTD strategic plan (2021-2025).
- The 2022 Annual Review Meetings was also convened in Gambella region in January 2023 where program performances were reviewed, and recommendations formulated. The Annual Programme managers meeting in Atlanta, USA was also attended virtually in March 2023. Ethiopia had presented the key performances on the eradication program and new innovative ways of vector control by using environmental modification/management strategies. WHO technically and financially supported the review meeting preparations.
- The EDEP Technical Working Group was convened on monthly bases, monitored program performances, identified gaps, and addressed issues of concern accordingly.

Capacity Building

During 2023, WHO supported training of a total of **185** health professionals on Guinea worm disease surveillance and other locally relevant neglected tropical diseases in Gambella and Benishangul Gumuz regions. Training participants were recruited from health facilities in seven refugee camps, hosting communities, districts sharing common border with South Sudan, and health facilities located in gold mining areas attracting migrant workers from South Sudan. Besides, WHO's Guinea worm field officers conducted sensitization for **432** health professionals attending other health program training workshops and during field visit in refugee camps.

Figure 2 Training of health professionals in Gambella and Benishangul Gumuz Region





During the reporting year WHO supported annual standard training for a total of **468** community health workers and supervisors in seven refugee camps in Gambella and Benishangul Gumuz regions. On top of this, WHO's Guinea worm field officers conducted replacement trainings and sensitization sessions for **731** community health workers. In 2023, all (100%) blocks (villages) in seven refugee camps have had at least one community health worker trained in Guinea worm disease surveillance.

House to House Active Case Search and Health Education

In 2023, WHO's Guinea worm field officers provided technical support on monthly house to house active case search and provision of health education in seven refugee camps. As showed in the below table, on average, every month, nearly **13,000** households and over **72,000** people were reached by house-to-house case search and health education, respectively.

Table 1: Number of households and people covered by active case search and health education in 7 refugee camps in 2023.

Month	No of	No of
	HHs	people
	visited	reached
Jan	14,801	80,622
Feb	18,645	96,443
March	15,281	78,300
April	15,230	85,881
May	13,852	76,290
June	15,037	72,756
July	10,678	50,160
August	10,415	51,544
September	10,350	51,875
October	8,380	74,676
November	7,580	62,954
December	15,660	85,942
Average	12,992	72,287



Figure 3 House to house active case search and health education in refugee camp

Integration of Dracunculiasis case search with immunization campaigns

In 2023, WHO supported integration of Guinea worm disease surveillance with measles, COVID-19 vaccination, and onchocerciasis Mass Drug Administration (MDA) campaigns. During these campaigns, a total of **70,642** people were interviewed and provided with health education on Guinea worm disease and the cash reward for reporting cases.

Dracunculiasis Surveillance at entry points

WHO supported Guinea worm disease surveillance at six entry points in Gambella region (Akobo Tiergol, Buribiey, Pagak, Wankey, Pochala, and Raad) and one entry point in Benishangul Gumuz region (Kumruk). The WHO support on GWD surveillance at entry

points include on-site training of health professionals, investigation of rumors/suspected cases of GWD and provision of surveillance forms and IEC materials.

Figure 4 GWD case search and awareness raising in Kumuruk entry point



Active case finding and health education in large public gathering places.

WHO supported the dissemination of GWD and cash reward messages using mobile van with mega loudspeaker in seven local languages such as Arebic, Denka, Fugn, Meban, Nuer, Oduk, and Swahili. A total of **53** health education sessions were conducted in large public gathering places such as schools, ration distribution sites, and marketplaces in all refugee camps. Over **180,000** people were reached and provided with health education.

Figure 5 GWD and cash reward awareness raising campaign in refugee camps





Distribution of Information, Education, and Communication (IEC) materials

WHO supported the development, printing, and distribution of **3,600** GWD cash reward posters which were publicized in every block (village), school, health centre, market, and other large public gathering places within the various refugee camps. On top of this **2,800** Guinea worm recognition cards and **1,000** Guinea worm T-shirts were distributed to the community health workers and health professionals. Similarly, **150** GWD case definitions and **50** GWD standard operation procedures were provided to the health facilities within the refugee camps.

Figure 6 IEC materials distributed in refugee camps







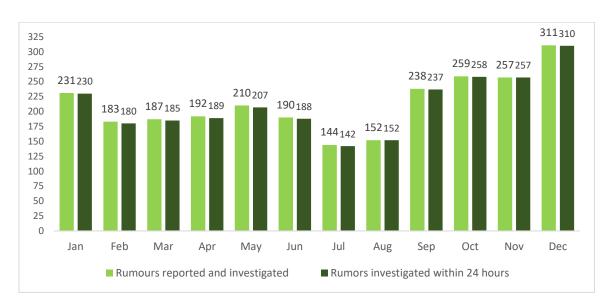
Rumors reporting and investigation.

Increased detection and reporting of rumours and suspected cases is a key indicator of Guinea worm disease surveillance. In 2023, a total of **2,554** rumours and suspected cases were reported from seven refugee camps. Of these, **2,535** (99%) of rumours and suspected cases were investigated within 24 hours. None of the rumours and suspected cases were confirmed as a case of Guinea worm disease. WHO's Guinea worm field officers had also participated and supported the investigation of highly suspected human cases and animal infections in the endemic areas.

Table 2 Number of rumors and suspected cases reported and investigated within 24 hours by refugee camp, 2023.

		Rumors
Refugee	Rumors reported	investigated
Camp	and investigated	within 24 hours
Kule	196	196
Jewi	438	436
Okugo	78	78
Nguenyyiel	305	305
Terkedi	491	487
Sherkole	467	462
Tsore	579	571
Total	2,554	2,535 (99%)

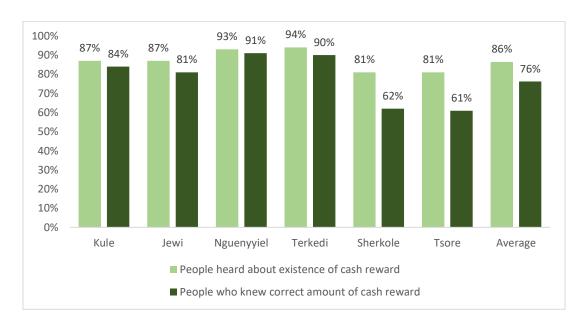
Figure 7 Number of rumors and suspected cases reported and investigated by month in refugee camps, 2023.



Performance monitoring and assessment of cash reward awareness

WHO monitored program performance through monthly supervisions in refugee camps, review of reports, periodic meetings with community health workers/supervisors and spot check awareness assessment in households. Standard awareness surveys were conducted in six refugee camps through interview of **2,720** individuals, of which **2,351 (86%)** heard about the existence of the cash reward and **2073 (76%)** knew the correct amount the reward.

Figure 8: Percentage of people heard about the cash reward and people who knew the correct amount of reward by refugee camp, 2023.



EDEP provides 500 Ethiopian birr for reporting infected animals. During the awareness survey in four refugee camps of Gambella region, a total of **1,600** individuals were asked on the cash reward awareness. Of these **64%** heard about the existence of cash reward for reporting infected animals and **60%** knew the correct amount of the reward.

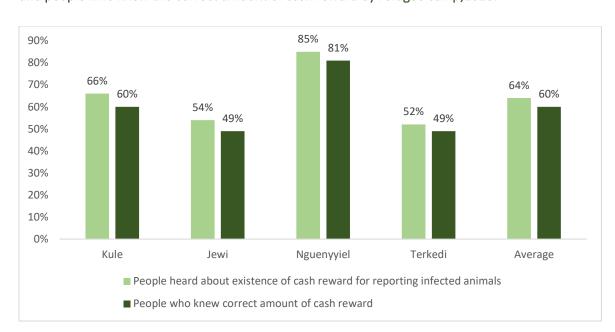


Figure 9: Percentage of people heard about existence of cash reward for reporting infected animal and people who knew the correct amount of cash reward by refugee camp,2023.

Documentation of GWD surveillance data for certification

To strengthen proper documentation of GWD surveillance, WHO provided all essential data collection, compilation, and reporting forms, supervisory checklists, and file folders to all refugee camps. All zones and blocks under active surveillance submitted their GWD surveillance report to their respective refugee camps and all refugee camps submitted monthly report to the regional health bureaus (RHB). All reports were kept in file folders and properly archived in the refugee camps and RHBs for future review by international certification teams. WHO supported the EDEP to update and maintain



certification teams. WHO supported the EDEP to update and maintain electronic data as part of strengthening documentations for subsequent certification.

Direct Financial Cooperation (DFC)

SN	Recipient	Amount	Purpose
1	EPHI	1,679,911	To support GWEP activities
2	Gambella	721,875	To support training of community outreach agents
3	Benishangul Gumuz	541,700	To support training of community outreach agents
4	SNNPR	251,370	To support training of health workers at entry point of formerly endemic area (Nyangatom)
	Total	3,194,856	

SECTION 2 PREVENTIVE CHEMOTHERAPY NTDs

SECTION 2

PREVENTIVE CHEMOTHERAPY NTDS

Background

Preventive chemotherapy is one of the main interventions used by national programmes to control and eliminate five neglected tropical diseases (NTDs): lymphatic filariasis, onchocerciasis, schistosomiasis, soil-transmitted helminthiases and trachoma. The intervention is through mass drug administration (MDA) and school-based treatments, with the goal of treating populations at risk of infection at appropriate, regular intervals. In order to meet the coverage targets the supply chain must be managed, from planning and quantifying needs, to moving stock from production sites to patients at the service delivery point to communities, schools and hospitals, among others, and to retrieving and accounting for leftover stock. A fundamental step in monitoring the success of programmes is knowing the coverage of preventive chemotherapy.

The Expanded Special Project for the Elimination of NTDs (ESPEN) has been supporting Ethiopia in scaling up and scaling down interventions notably by filling the gaps on Mass Drug Administration (MDA) campaigns, supporting mapping/surveys for PC NTDs and facilitating the PC NTD Medicines donation through the Joint Application Package (JAP).

In 2023 workplan, the WHO country office conducted various activities including quantification and importation of PC medicines for MDA, supported NTD program annual review meeting, conducting integrated supportive supervision for PC NTDs during and after MDA, Supported the MOH to cascade woreda level toolkit on WASH NTD integration.

Key Achievements in 2023

The 2024 Joint Request for Selected PC Medicines (JRSM) and 2022 Joint Report Form (JRF) was supported and timely submitted through the JAP platform. This involves a quantification workshop involving regional NTD managers and implementing partners. Mass Drug Administration campaigns undertaken for Preventive Chemotherapy NTDs (Onchocerciasis, Lymphatic Filariasis, Soil Transmitted Helminthiasis, Schistosomiasis and Trachoma) in the endemic districts of the country.

The world NTD day was commemorated in Jima university in collaboration with WHO, Oromia Regional health Bureau and NTD partners. OIC used this opportunity to mobilize resources for NTDs and convened a meeting in WCO with the USDAID mission team.



Commemoration of the Thrird World NTD Day, Jimma Oromia, Januray 2023

The quantity of each product imported by WHO summarized in the below table.

Product	Quantity imported (tabs)	Remark
Albendazole	3,915,000	For LF MDA
Ivermectin	35,740,500	For LF and Oncho MDA
Mebendazole	30,884,000	For STH MDA
Praziquantel	15,248,000	For SCH MDA

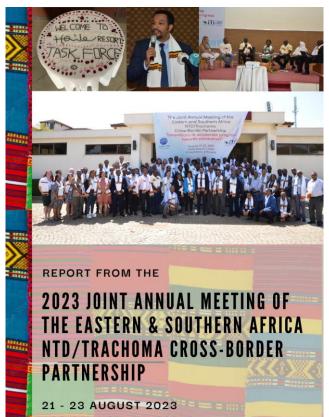
Hosted joint mission a team from WHO AFRO and HQ on country support for WHO-facilitated PC NTD medicines inventory management.





Technical Mission on PC NTD medicines inventory management, SNNPR, June 2023

A joint Trachoma/NTD cross border partnership meeting was conducted which convened participants from 12 eastern and southern Africa countries held in Arba Minch town with a



Joint annual meeting of the Eastern and Southern Africa NTD/trachoma, Haile Resort, Arba Minch, August 2023

theme: Innovation for accelerating elimination. An expert from WHO/ESPEN presented a global overview and updates on trachoma elimination.

NTD review meeting attended by more than one hundred participants held in Hawassa city that pulled-out recommendations to inform the next cycle of annual planning. The DPC Lead Executive Officer, other dignitaries opened this event. On top of this, WHO presented the recommendations formulated by a mission team from AFRO and HQ on improving inventory management of PC NTD medicines.

Regional level advocacy workshop on WASH-NTDs conducted in Sidama region to integrate NTD in WASH program. Woreda (districts) level technical working group and task force team trained on Integrated WASH NTD toolkit for joint monitoring and evaluation of WASH investment for NTDs elimination.

A conference on elimination of trachoma in Ethiopia during the commemoration of world Sight Day was conducted in Sheraton Addis in the presence of different NTD partners. The OIC for WR presented global overview and progress in trachoma elimination.



Commemoration of World sight day through a conference on Trachoma Elimination. Sheraton Addis,
October 2023.

KEY ACHIEVEMENTS BY DISEASE

Lymphatic Filariasis

WHO country office supported MOH and RHBs to reach over 1.7 million individuals in twenty-eight implementation units using Albendazole plus Ivermectin Mass Drug

Administration (MDA) campaigns. WHO imported. WHO imported 3,915,000 tablets of Albendazole and 35,740,500 tablets of ivermectin.

WHO facilitated the approval of TAS eligibility by AFRO team and request of FTS by MOH. Provided support for LF technical working group meetings at MOH.

Onchocerciasis

WHO country office supported MOH and RHBs to reach over 32 million individuals in 273 implementation units using Ivermectin Mass Drug Administration (MDA) campaigns. WHO imported 35,740,500 tablets of ivermectin for (LF and Onchocerciasis). Supported MOH to adapt the WHO entomological manual for onchocerciasis elimination programme. Attended and provided inputs in national onchocerciasis technical working group meetings.

Schistosomiasis

WHO country office supported MOH and RHBs to reach over 3.8 million individuals in 169 implementation units using Praziquantel Mass Drug Administration (MDA) campaigns. WHO imported 15,248,000 tablets of Praziquantel. Supported the subdistrict level treatment data in all regions.

Soil Transmitted Helminthiasis

WHO country office supported MOH and RHBs to reach over 18 million individuals in 402 implementation units using Mebendazole Mass Drug Administration (MDA) campaigns. WHO imported 30,884,000 tablets of Mebendazole.

Trachoma

Over seventeen million individuals reached in **140** implementation units using Azithromycin/TEO Mass Drug Administration (MDA) campaign. Attended and provided support in the national trachoma taskforce meeting.

Summary of Financial Support

S/No.	Direct financial	Purpose	Amount
	cooperation (DFC)		(USD)
1	Oromia Regional	Support MOH to celebrate World NTD day	4,980
	health bureau		
2	Sidama regional	Support MOH annual NTD program review	30,000
	Health bureau	meeting and WASH tool kit training	
3	Sidama regional	Support WASH tool kit training	10,000
	Health bureau		
4	NPO salary	To support an NPO salary	36,
			696

SECTION B CASE MANAGEMENT NTDs

SECTION 3

CASE MANAGEMENT NTDs

BACKGROUND

The WHO country office Ethiopia has been supporting the activities of case management NTDs programs of Ethiopia technically and financially so that the country will achieve the targets set by the WHO NTD Road Map 2021–2030. The technical supports provided include offsite capacity building trainings, onsite coachings of health workers at health facilities and expertise contribution during development of gudelines and manuals. The WHO country office Ethiopia has also actively participated in monitoring and evaluation of the activities of case management NTDs programs of Ethiopia along with Ministry of Health (MoH) and other stakeholders.

In 2023, the WHO country office Ethiopia acqured **219,339** USD from WHO HQ and AFRO to support different activities of the case management NTDs programs of MoH including case finding, diagnosis, and management; provision of medicines and laboratory test kits; capacity building trainings of health workers, conducting implementatinal researches, implenting disease prevention activities, and conducting a national level annual NTDs program performance eveluation meeting besides other activities supported financially.

SUMMARY OF KEY ACHIEVEMENTS:

1. WHO country office Ethiopia supported the supply of medicines and laboratory testing kits for Visceral leishmaniasis, Leprosy and Human African Trypanosomiasis form importation by WHO to distribution to health facilities by Ethtiopian Pharmaceutical Supply Service. The medical supplies imported and ditributed in 2023 include 20,800 vials of Ambisome; 11,200 tablets of Miltefosine, 4200 vials of Sodium Stibo-Gluconate, 8400 ampouls of Paromomycin and 14,500 rK-39

- diagnostic test kits. The provision of these medical supplies contributed to the reduction of Visceral Leishmaniasis case fatality rate to **2%**.
- 2. Capacity building trainings were provided by WHO country office Ethiopia on case management NTDs to 304 health workers and 218 community health extension workers from different regions of Ethiopia as summarized in the table below. These trainings improved the case finding, treatment service and prevention activities of the different case management NTDs supported by capacity building.

S.NO	Topic of training	Number of trinees	Regions supported	Remark
1	Case management of	85	SNNPR, South	VL outbreak in
	Visceral Leishmaniasis		Omo Zone,	South Omo zone
	(VL)		Somali Region	of SNNPR
2	Integrated Noma and	111	Amhara, Sidama,	Primary care
	Skin NTDs		Somali,	workers were
			Oromia	trained
3	Oral health promotion	218	Amhara, Sidama,	Community
	and noma prevention		Somali,	health workers
			Oromia	were trained
4	Human African	36	SNNPR,	HAT outbreak in
	Trypanosomiasis (HAT)		SWER Gambella	Gamo Zone of
				SNNPR
5	Case management of	72	Somali	CL outbreak in
	Cutaneous		Oromia	Somali region
	Leishmaniasis (CL)			

3. WHO country office Ethiopia supported financially and teccnically meetings and workshops, which include national level annual NTDs program performance

eveluation meeting, workshops on leprosy guideline development and national launching workshop on leprosy contact screening and post-exposure prophylaxis.

WHO country office Ethiopia also participated in national, regional and, global technical meetings on case management NTDs including leishmaniasis, leprosy, HAT, skin NTDs and snakebite envenoming.

- 4. Integrated Supportive Supervision by WHO NTDs officers and regional NTDs officers was conducted at 24 health facilities in Tigray, Afar, SNNP and Somali regions of Ethiopia. During the suppotive supervision visit to health facilities, onsite coaching on case management of Visceral Leishmaniasis was provided to 214 health workers. These improved the quality of diagnosis and treatment service of Visceral Leishmaniasis provided by the health facilities resulting in good treatment outcomes.
- 5. Impementation research activities were supported financially which include a redearch entitled "Assessment of Skin NTDs burden through community screening during Scabies MDA campaign, SNNPR, Ethiopia" being conducted in collaboration with Collaborative Research Center for NTDs, Arbaminch University. Another research financially supported by WHO and being conducted by Bahir Dar University is on "Mapping and decentralization of diagnosis and treatment of mycetoma and other subcutaneous mycosis in primary health care in Ethiopia." Arba Minch University is also conducting an assement study on the risk factors for Visceral Leishmaniasis outbreak in South Omo zone financed by WHO.

SUMMARY OF FINANCIAL SUPPORT

219,339 USD was transferred to various institutions by Direct Financial Cooperation (DFC) and Direct Implementation (DI) as indicted in the table below.

S.NO	Direct Financial cooperation	Purpose	Amount
	(DFC)/Direct Implementation (DI)		in USD
1	SNNP Regional Health Bureau (DI)	Training on Case management of	8,773
		Visceral Leishmaniasis	
2	SNNP Regional Health Bureau (DI)	Training and surveillance activities on	19,100
		Human African Trypanosomiasis	
3	Amhara Regional Health Bureau	Training on Integrated Noma, Skin	64,000
	(DI)	NTDs and oral health promotion	
	Sidama Regional Health Bureau		
	(DFC)		
	Oromia Regional Health Bureau		
	(DFC)		
	Somali Regional Health Bureau		
	(DFC)		
4	Oromia Regional Health Bureau	Leprosy contact screening and PEP	45,000
	(DFC)		
	Amhara Regional Health Bureau		
	(DFC)		
5	Somali Regional Health Bureau	Training on Case management of	18,000
	(DFC)	Cutaneous Leishmaniasis	
6	Arba Minch University (DFC)	Rsearch on skin NTDs assessment	24,466
7	Bahir Dar University (DFC)	Research on mapping of Mycetoma	20,000
8	Arba Minch University (DFC)	Research on study on the risk factors	20,000
		for VL outbreak in South Omo zone	
Total			219,339

56,892 USD used for staff salary/data officer and CM NTDs officer at the WHO Country office

6,800 USD used for medical supplies expense/settling custom clearances

250,000 USD mobilized from WCO Emergency Program for procurement of medicines and test kits for Visceral Leishmaniasis needed for Ethiopia in the year 2024.

Action Pictures



Onsite coaching on Leprosy by WHO NTDs officer to health workers in Fik Primary Hospital, Somali Region, December 2023



Onsite coaching on Leishmaniasis by WHO NTDs officer to health workers in Gode Primary Hospital, Somali Region, September 2023.



Meeting of WHO HQ scientist, Dr Jain Saurabh, and WHO NTDs officers with health workers from Jinka Primary Hospital Visceral Leishmaniasis Treatment Center



Training on integrated Noma and skin NTDs for primary care health workers from Somali Region, November 2023

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